PTO/SB/05 (05-03)
Approved for use through 04/30/2003. OMB 0651-0032
U.S. Patent and Trademark Office. U.S. DEPARTMENT OF COMMERCE.

UTILITY PATENT APPLICATION TRANSMITTAL

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2	Attorney Docket No. First Inventor		
061			
~	Title		
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Express Mail Label No. ER00759591 U.S.

(Only for new nonprovisional applications under 37 CFR 1.53(b))

A.1	DDI ICATION EL EMENTS		Commissioner for Patents Mall Stop Patent Application				
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.		ADDRESS TO: Mail step Patient Application P.O. Box 1450 Alexandria VA 22313-1450					
1. X Fee Transi (Submit and 2 Applicant of See 37 CF Specification (preferred air - Descriptive - Cross Refe - Statement - Reference or a compu - Brief Summ - Brief Descriptive - Claim(s) - Abstract of 4. X Drawing(s	mittal Form (e.g., PTC/SB/17) priginal and a duplicate for fee processing) claims small entity status. R 1.27. In an angement set forth below) a title of the invention erence to Related Applications Regarding Fed sponsored R & D to sequence listing, a table, uter program listing appendix ad of the invention marpy of the Invention miption of the Drawings (if filed) escription If the Disclosure (35 U.S.C. 113) [Total Sheets]	7. CD-ROM or CD-R Computer Program 8. Nucleotide and/or Ami (if applicable, all neces a. Computer R b. Specification i. CD-RO ii. Paper c. Statements ACCOMPANYI 9. Assignment Paper 10. 37 CFR 3.73(b) (when there is a English Translat 12. Information Disc	in duplicate, large table or m (Appendix) no Acid Sequence Submission sary) eader Form (CRF) n Sequence Listing on: OM or CD-R (2 copies); or verifying identity of above copies NG APPLICATION PARTS Ders (cover sheet & document(s)) Statement Power of m essignee) Attorney tion Document (if applicable) closure Copies of IDS				
b. Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed) i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) name in the prior application, see 37 CFR		Statement (IDS)/PTO-1499 Citations Preliminary Amendment 14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. Certified Copy of Priority Document(s) (if foreign priority is claimed) Nonpublication Request under 35 U.S.C. 122					
	(d)(2) and 1.33(b). ion Data Sheet. See 37 CFR 1.76	(b)(2)(B)(i). App or its equivalent	licant must attach form PTO/SB/35				
	NG APPLICATION, check appropriate box, and sup ing the title, or in an Application Data Sheet under 3		below and in the first sentence of the				
			anntage Ala				
Continuati	h		application No.:				
Prior application information: Examiner Art Unit: For CONTINUATION OF DIVISIONAL APPS only; The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 6b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.							
	19. CORRESPON	DENCE ADDRESS					
Customer Number or Ber Code Label Insert Customer No or Altraction and Description (Contespondence address below							
Name	JAMES D. FORNAMI	es Q					
Address	645 MADISON AVEN	$\frac{1}{2}$	FLOUR				
City	Ven York	State //	Zip Code /0022				
Country	usa i i	elephone 2/2-698-	0567 Fax 2/1-6980573				
Name (Print/Type) LINTES NO. Aforman Registration No. (Attorney/Agent) 25, \$60							
Signature	MATTER		Dafe				

This collection of information is required by 87 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOV SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

SUBMITTED BY

PTO/SB/17 (05-03)

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TRANSMIT for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27 TOTAL AMOUNT OF PAYMENT

Complete if Kn wn						
Application Number						
Filing Date	June 26 2003					
First Named Inventor	JOHN TRVING					
Examiner Name						
Art Unit						
Attorney Docket No.	3800.06					

(Complete (if applicable)

METHOD OF PAYMENT (check all that apply)				FEE	E CALCULATION (continued)	
Check Credit card Money Other None	3. Al	DDITI	ONAL	FEE	S	
Deposit Account:	Large Entity Small Entity					
Deposit Account.	Fee Code	Fee		Fee	Fee Description	
Account	1051	(\$) 130	2051	(\$) 65	Surcharge - late filing fee or oath	Fee Paid
Number Deposit	1052	50	2052		Surcharge - late provisional filing fee or	——
Account Name	1002	30	2002		cover sheet	
The Director is authorized to: (check all that apply)	1053 1812	130	1053		Non-English specification	
Charge fee(s) indicated below Credit any overpayments .		2,520	1812	_,	For filing a request for ex parte reexamination	
Charge any additional fee(s) during the pendency of this application		920*	1804	920*	Requesting publication of SIR prior to Examiner action	
Charge fee(s) indicated below, except for the filing fee		1,840*	1805	1.840°	Requesting publication of SIR after	
to the above-identified deposit account.				-	Examiner action	
FEE CALCULATION	1251	110	2251	55	Extension for reply within first month	
1. BASIC FILING FEE	1252	410	2252	205	Extension for reply within second month	
Large Entity Small Entity Fee Fee Fee Fee Description Fee Paid	1253	930	2253		Extension for reply within third month .	
Fee Fee Fee Fee Description Fee Paid Code (\$) Code (\$)	1254	1,450	2254	725	Extension for reply within fourth month	
1001 750 2001 375 Utility filing fee	1255	1,970	2255	985	Extension for reply within fifth month	-
1002 330 2002 165 · Design filing fee	1401	320	2401	160	Notice of Appeal	
1003 520 2003 260 Plant filing fee	1402	320	2402	160	Filing a brief in support of an appeal	
1004 750 2004 375 Reissue filing fee	1403	280	2403	140	Request for oral hearing	
1005 160 2005 80 Provisional filing fee	1451	1,510	1451	1,510	Petition to institute a public use proceeding	
SUBTOTAL (1) (\$) 375	1452	110	2452	55	Petition to revive - unavoidable	
		1,300	2453	650	Petition to revive - unintentional	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1501	1,300	2501	650	Utility issue fee (or reissue)	
Extra Claims below Fee Paid Total Claims X	1502	470	2502		Design issue fee	
Independent -	1503	630	2503		Plant issue fee	
Claims X = X = X	1460	130	1460	130	Petitions to the Commissioner	
		50	180	7 50	Processing fee under 37 CFR 1.17(q)	
Large Entity Small Entity Fee Fee Fee Fee Pescription	1806	180	1800		Submission of Information Disclosure Stmt	
Code (\$) Code (\$)	8021	40	802	1 40	Recording each patent assignment per property (times number of properties)) j
1202 18 2202 9 Claims in excess of 20	1809	750	280	9 375	Filing a submission after final rejection	
1201 84 2201 42 Independent claims in excess of 3					(37 ČFR 1.129(a))	
1203 280 2203 140 Multiple dependent claim, if not paid	1810	750	2810	375	For each additional invention to be examined (37 CFR 1.129(b))	
1204 84 2204 42 ** Reissue independent claims over original patent		750	2801	375	· · · · · · · · · · · · · · · · · · ·	
1205 18 2205 9 ** Reissue claims in excess of 20	1801 1802	900	1802			
and over original patent			I		of a design application	
SUBTOTAL (2) (\$) Other fee (specify)						
**or number previously paid, if greater, For Reissues, see above			Basic	Filing F	ee Paid SUBTOTAL (3) (\$)	

Registration No. Unnes D. FERNAN Telephone 2 Name (Print/Type) Signature Date

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